# Case 17-80797 Doc 1 Filed 04/05/17 Entered 04/05/17 14:49:17 Desc Main Document Page 1 of 47

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar	e the name that is on government-issued ure identification (for nple, your driver's use or passport).	Brashanda First name S.	First name
		Middle name	Middle name	
	iden	g your picture tification to your ting with the trustee.	Cast name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ide your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security ber or federal vidual Taxpayer utification number	xxx-xx-8315	

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Debtor 1 Brashanda S. Grayned

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	444.0 ( 10 10 10	If Debtor 2 lives at a different address:
		4411 Crawford Drive #2 Rockford, IL 61114	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Winnebago	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	<ul> <li>Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> </ul>
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Brashanda S. Grayned

Part 2:

Case number (if known) Tell the Court About Your Bankruptcy Case The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under

		- Cha	ipiei /				
		☐ Cha	pter 11				
		☐ Cha	pter 12				
		☐ Cha	pter 13				
			•				
3.	How you will pay the fee	a o a	bout how your der. If your pre-printed	ou may pay. Typic r attorney is submi d address.	cally, if you are paying the fee you itting your payment on your behalt	with the clerk's office in your local court for reself, you may pay with cash, cashier's chec, your attorney may pay with a credit card o	ck, or money r check with
					<b>Ilments.</b> If you choose this option (Official Form 103A).	, sign and attach the Application for Individu	als to Pay
		□ I b	request that	at my fee be waiv	ved (You may request this option of the court fee, and may do so only if your	only if you are filing for Chapter 7. By law, a income is less than 150% of the official povers.	verty line that
						nstallments). If you choose this option, you Il Form 103B) and file it with your petition.	must fill out
).	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes.					
			District			Case number	
			District		When		
			District		When	Case number	
0.	Are any bankruptcy						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
1.	Do you rent your	□ No.	Go to	line 12.			
	residence?	Yes.	Has y	our landlord obtair	ned an eviction judgment against y	ou and do you want to stay in your residence	ce?
		— 165.	•	No. Go to line 12	2.		
				Yes. Fill out <i>Initio</i> bankruptcy petiti		dgment Against You (Form 101A) and file it	with this

Voluntary Petition for Individuals Filing for Bankruptcy

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Debtor 1 Brashanda S. Grayned Document Page 4 of 47 Case number (if known)

Par	Report About Any Bu	sinesses `	You Own	as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State & ZIP Code			
	it to this petition.		Check	k the appropriate box to describe your business:			
				Health Care Business (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as defined in 11 U.S.C. § 101(53A))			
				Commodity Broker (as defined in 11 U.S.C. § 101(6))			
				None of the above			
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must atta				der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of low statement, and federal income tax return or if any of these documents do not exist, follow the procedure (1)(B).			
	For a definition of small	■ No.	I am n	not filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am fi	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?  Number, Street, City, State & Zip Code			

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Debtor 1 Brashanda S. Grayned

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Entered 04/05/17 14:49:17 Case 17-80797 Doc 1 Filed 04/05/17 Desc Main Page 6 of 47 Document Case number (if known) Debtor 1 Brashanda S. Grayned Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,

and 3571. /s/ Brashanda S. Grayned Signature of Debtor 2 Brashanda S. Grayned

Signature of Debtor 1

Executed on

Executed on April 5, 2017

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Brashanda S. Grayned

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Case number (if known)

/s/ Daniel	A. Springer	Date	April 5, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Daniel A. S	Springer		
Springer L	.aw Firm		
Firm name			
2222 E Sta	ite St		
Suite 107			
Rockford,	IL 61104		
Number, Street,	City, State & ZIP Code		
Contact phone	815.312.4725	Email address	dspringerlaw@gmail.com
6314059			
Bar number & S	tate		

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Fill in this inforr	mation to identify your	case:		
Debtor 1	Brashanda S. Gra	nyned		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS	
Case number				☐ Check if this is an amended filing
				amended ming

### Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

•			
Par	Summarize Your Assets		
		Your as Value of	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	16,430.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	16,430.00
Par	t 2: Summarize Your Liabilities		
		Your lia Amount	abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	3,909.00
	Your total liabilities	\$	3,909.00
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,454.79
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,374.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal	family, or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,001.60 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	513.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	513.00

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n 106A/B  A/B: Properately list and describe is complete and accurate pace is needed, attach a line.	Middle Name  Middle Name  Middle Name  IORTHERN DISTRICT C  PTY  tems. List an asset only or as possible. If two married	Last Name  Last Name  DF ILLINOIS  nce. If an asset fits in more than of people are filing together, both and not the top of any additional page.		amended filing
First Name  First Name  uptcy Court for the:	Middle Name  Middle Name  IORTHERN DISTRICT C  PTY  tems. List an asset only of as possible. If two married	Last Name  OF ILLINOIS  nce. If an asset fits in more than of people are filing together, both a	one category, list the asset in the	amended filing
First Name  First Name  uptcy Court for the:	Middle Name  Middle Name  IORTHERN DISTRICT C  PTY  tems. List an asset only of as possible. If two married	Last Name  OF ILLINOIS  nce. If an asset fits in more than of people are filing together, both a	one category, list the asset in the	amended filing
n 106A/B  A/B: Prope  Trately list and describe is complete and accurate bace is needed, attach a second	erty tems. List an asset only or as possible. If two married	OF ILLINOIS  nce. If an asset fits in more than of people are filing together, both a	one category, list the asset in the	amended filing
n 106A/B  A/B: Prope  Trately list and describe is complete and accurate bace is needed, attach a second	erty tems. List an asset only or as possible. If two married	OF ILLINOIS  nce. If an asset fits in more than of people are filing together, both a	one category, list the asset in the	amended filing
n 106A/B  A/B: Properately list and describe is complete and accurate pace is needed, attach a line.	erty tems. List an asset only or as possible. If two married	nce. If an asset fits in more than o	one category, list the asset in the	amended filing
A/B: Properately list and describe is complete and accurate pace is needed, attach a in.	tems. List an asset only or as possible. If two married	d people are filing together, both a	one category, list the asset in the	amended filing
A/B: Properately list and describe is complete and accurate pace is needed, attach a in.	tems. List an asset only or as possible. If two married	d people are filing together, both a	one category, list the asset in the	amended filing
A/B: Properately list and describe is complete and accurate pace is needed, attach a in.	tems. List an asset only or as possible. If two married	d people are filing together, both a		12/15
A/B: Properately list and describe is complete and accurate pace is needed, attach a in.	tems. List an asset only or as possible. If two married	d people are filing together, both a		
A/B: Properately list and describe is complete and accurate pace is needed, attach a in.	tems. List an asset only or as possible. If two married	d people are filing together, both a		
rately list and describe is complete and accurate bace is needed, attach a n.	tems. List an asset only or as possible. If two married	d people are filing together, both a		
rately list and describe is complete and accurate bace is needed, attach a n.	tems. List an asset only or as possible. If two married	d people are filing together, both a		
s complete and accurate pace is needed, attach a n.	as possible. If two married	d people are filing together, both a		category where you
h Residence, Building, L				lying correct
	and, or Other Real Estate	You Own or Have an Interest In		
e any legal or equitable in	nterest in any residence, b	uilding, land, or similar property?		
e property?				
- FF				
ır Vehicles				
s, tractors, sport utili	ty venicies, motorcycle	s		
ntiac	Who has an intere	est in the property? Check one		
	■ Debtor 1 only			
)8	<u> </u>		Current value of the	Current value of the
ileage: 121,00	Debtor 1 and D	ebtor 2 only		ortion you own?
on:	At least one of t	he debtors and another		
			\$2 925 00	\$2.925.00
	(see instructions)	community property	ΨΣ,323.00	ΨΣ,323.00
	or have legal or equit. If you lease a vehicle, s, tractors, sport utili  ntiac  8 Ileage: 121,00  on:	or have legal or equitable interest in any vehicles. If you lease a vehicle, also report it on Schedus, tractors, sport utility vehicles, motorcycles, tractors, sport utility vehicles, motorcycles.  Motor has an interest in any vehicles, motorcycles.  Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the contractions.	or have legal or equitable interest in any vehicles, whether they are register. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Costs, tractors, sport utility vehicles, motorcycles    Main	or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles are vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.  Intiac  Who has an interest in the property? Check one Do not deduct secured claim the amount of any secured concreditors Who Have Claims  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 4 tleast one of the debtors and another Do not deduct secured claim the amount of any secured concreditors Who Have Claims  Current value of the entire property?  St., 925.00  Do not deduct secured claim the amount of any secured concreditors Who Have Claims  Current value of the entire property?  \$2,925.00

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

Part 4: Describe Your Financial Assets  Do you own or have any legal or equitable interest in any of the following?	Current value of the
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attache for Part 3. Write that number here	d \$1,500.00
<ul> <li>14. Any other personal and household items you did not already list, including any health aids you did not I</li> <li>■ No</li> <li>□ Yes. Give specific information</li> </ul>	ist
■ No □ Yes. Describe	
13. Non-farm animals  Examples: Dogs, cats, birds, horses	
<ul> <li>12. Jewelry  Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, ge  No  Yes. Describe</li> </ul>	ems, gold, silver
Used Clothing	\$300.00
<ul> <li>11. Clothes</li></ul>	
<ul> <li>10. Firearms     Examples: Pistols, rifles, shotguns, ammunition, and related equipment</li> <li>■ No</li> <li>□ Yes. Describe</li> </ul>	
<ul> <li>9. Equipment for sports and hobbies         Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; cal musical instruments         ■ No         □ Yes. Describe     </li> </ul>	noes and kayaks; carpentry tools;
<ul> <li>8. Collectibles of value         Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, other collections, memorabilia, collectibles         ■ No         □ Yes. Describe     </li> </ul>	, coin, or baseball card collections;
3 TV's, Computer	\$200.00
<ul> <li>7. Electronics         Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; mincluding cell phones, cameras, media players, games         □ No         ■ Yes. Describe     </li> </ul>	usic collections; electronic devices
Household Furniture	\$1,000.00
■ Yes. Describe	\$4.000.00
Brashanda S. Grayned Case number (if ki	nown)
Debtor 1 Brashanda S Grayned  Case 17-80797 Doc't Filed 04/05/17 Efficied 04/05/17 14.49  Document Page 11 of 47  Case number /if for	

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Debtor 1 Brashanda S. Grayned 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... Checking Members Alliance Credit Union \$0.00 17 1 Members Alliance Credit Union \$0.00 Savings 17.2. **Credit Union One** \$5.00 17.3. Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No Institution name or individual: ☐ Yes. .....

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☐ Yes. Give specific information about them...

		Case 17-807	97	Doc 1	Filed 04/05/17 Document		5/17 14:49:17	Desc Main
De	ebtor 1 _	Brashanda S. Gr	ayned	l	Document	Page 13 of 47 <sub>C</sub>	ase number (if known)	
26.	Example ■ No		names,	websites, p	ets, and other intellectuation		ts	
27.	Example  ■ No	, franchises, and on some services; Building permits, ive specific informa	exclusi	ve licenses	ngibles s, cooperative association	nholdings, liquor licens	es, professional licens	es
M	oney or pr	operty owed to yo	u?					Current value of the portion you own?  Do not deduct secured claims or exemptions.
28.	■ No	nds owed to you ve specific informat	ion abo	out them, in	cluding whether you alrea	ady filed the returns and	d the tax years	
29.	29. Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement  □ No  ■ Yes. Give specific information							
				Вас	k Child Support		Child Support	\$12,000.00
30.	Example ■ No	ounts someone o s: Unpaid wages, d benefits; unpaid ive specific informa	isability loans y	insurance	payments, disability bene someone else	efits, sick pay, vacation	pay, workers' compet	nsation, Social Security
31.		in insurance polices: Health, disability,		nsurance; l	health savings account (H	HSA); credit, homeowno	er's, or renter's insurar	nce
		ame the insurance o		y of each p any name:	olicy and list its value.	Beneficiar	y:	Surrender or refund value:
32.	If you are someone		a living		n someone who has die ct proceeds from a life ins		currently entitled to rece	eive property because
33.	Example No		yment		you have filed a lawsuit surance claims, or rights		or payment	
34.	_							
	■ No □ Yes. D	ntingent and unliq escribe each claim.	uidated	d claims of	f every nature, includinç	g counterclaims of the	e debtor and rights to	set off claims

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Deb	otor 1 Brashanda S. Grayned		Case number (if known)	
36.	Add the dollar value of all of your entries from Part 4, incored for Part 4. Write that number here			\$12,005.00
Part	t 5: Describe Any Business-Related Property You Own or Have a	n Interest In. List any real esta	ate in Part 1.	
37. <b>[</b>	Do you own or have any legal or equitable interest in any business	s-related property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	t 6: Describe Any Farm- and Commercial Fishing-Related Propertify you own or have an interest in farmland, list it in Part 1.	ty You Own or Have an Intere	st In.	
16. I	Do you own or have any legal or equitable interest in any	farm- or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	Describe All Property You Own or Have an Interest in Th	nat You Did Not List Above		
53.	Do you have other property of any kind you did not alread Examples: Season tickets, country club membership	ly list?		
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Wi	rite that number here		\$0.00
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$2,925.00		
57.	Part 3: Total personal and household items, line 15	\$1,500.00		
58.	Part 4: Total financial assets, line 36	\$12,005.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62	Total personal property. Add lines 56 through 61	\$16,430,00	Copy personal property total	\$16.430.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$16,430.00

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		I AUGUITIC	111 FAUE 13 VI 4				
Fill in this infor	Fill in this information to identify your case:						
Debtor 1	Brashanda S. Gra	ayned					
	First Name	Middle Name	Last Name	_			
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS				
Case number							
(if known)					Check if this is an		
					amended filing		

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2008 Pontiac G6 121,000 miles Line from Schedule A/B: 3.1	\$2,925.00		\$2,400.00	735 ILCS 5/12-1001(c)
Life from Schedule A.B. 3.1			100% of fair market value, up to any applicable statutory limit	
2008 Pontiac G6 121,000 miles	\$2,925.00		\$525.00	735 ILCS 5/12-1001(b)
Line from Scriedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit	
Household Furniture Line from Schedule A/B: 6.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
Enternolli dericada 7/2. G.1			100% of fair market value, up to any applicable statutory limit	
3 TV's, Computer Line from Schedule A/B: 7.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Life from Schedule A.B. 1.1			100% of fair market value, up to any applicable statutory limit	
Used Clothing Line from Schedule A/B: 11.1	\$300.00		\$300.00	735 ILCS 5/12-1001(a)
Line nom Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	

Document Page 16 of 47 Case number (if known) Brashanda S. Grayned Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Savings: Credit Union One 735 ILCS 5/12-1001(b) \$5.00 \$5.00 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit **Child Support: Back Child Support** 735 ILCS 5/12-1001(g)(4) 100% \$12,000.00 Line from Schedule A/B: 29.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Case 17-80797

No

Yes

Doc 1

Filed 04/05/17

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Fill in this information to identify your case:				
Debtor 1	Brashanda S. Gra	ayned		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this
				amended filir

### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

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		Document	Page 18 of 47	
Fill in this ir	nformation to identify your	case:		
Debtor 1	Brashanda S. Gra	avned		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
(Opouse II, IIIIIg)	i list ivallie			
United State	s Bankruptcy Court for the:	NORTHERN DISTRICT OF	FILLINOIS	
Case numbe	or			☐ Check if this is an amended filing
	orm 106E/F e E/F: Creditors W	/ho Have Unsecure	ed Claims	12/15
any executory Schedule G: E Schedule D: C left. Attach the name and case	contracts or unexpired leases xecutory Contracts and Unexp reditors Who Have Claims Sec	that could result in a claim. Al ired Leases (Official Form 1060 ured by Property. If more spac- ge. If you have no information to	DRITY claims and Part 2 for creditors with NON lso list executory contracts on Schedule A/B: P G). Do not include any creditors with partially s e is needed, copy the Part you need, fill it out, r o report in a Part, do not file that Part. On the to	roperty (Official Form 106A/B) and on ecured claims that are listed in number the entries in the boxes on the
1. Do any cr	reditors have priority unsecure	d claims against you?		
■ No. Go	o to Part 2.			
☐ Yes.				
Part 2: Li	st All of Your NONPRIORIT	Y Unsecured Claims		
3. Do any cr	reditors have nonpriority unsec	cured claims against you?		
☐ No. Yo	ou have nothing to report in this p	art. Submit this form to the court	with your other schedules.	
Yes.				
unsecured	d claim, list the creditor separatel	y for each claim. For each claim I	of the creditor who holds each claim. If a creditor isted, identify what type of claim it is. Do not list clayou have more than three nonpriority unsecured cl	nims already included in Part 1. If more
				Total claim
4.1 <b>Adv</b>	ance America	Last 4 digits of	account number	\$1,000.00
Attr 123	priority Creditor's Name n: Bankruptcy Dept. 9 Sandy Hollow Rd	When was the	debt incurred?	
Numl	ekford, IL 61109 ber Street City State Zlp Code incurred the debt? Check one.	As of the date y	you file, the claim is: Check all that apply	
<b>■</b> D	ebtor 1 only	☐ Contingent		
□D	ebtor 2 only	☐ Unliquidated		
	ebtor 1 and Debtor 2 only	☐ Disputed		
	t least one of the debtors and an	other Type of NONPF	RIORITY unsecured claim:	
□с	heck if this claim is for a com	munity	ns	
debt	e claim subject to offset?	Obligations a report as priority	arising out of a separation agreement or divorce th	at you did not
Is the	•		r claims nsion or profit-sharing plans, and other similar debt	S
\ □ Y		·	fy Personal Loan	
'		Other. Speci	iiy	

Best Case Bankruptcy

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DCDIO	brasilatiua 3. Grayileu	Odoc Hamber (II know)	
4.2	Commenity Bank/VCTRSSEC	Last 4 digits of account number	\$388.00
	Nonpriority Creditor's Name PO Box 182789	When was the debt incurred? 02/2016	
	Columbus, OH 43218  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.3	Dept of Ed/Nelnet	Last 4 digits of account number	\$513.00
	Nonpriority Creditor's Name 3015 Parker Rd. Suite 400	When was the debt incurred? 10/2012	
	Aurora, CO 80014	=	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	☐ Other. Specify	
		Student Loans	
4.4	Members Alliance Credit Union  Nonpriority Creditor's Name	Last 4 digits of account number	\$500.00
	2550 South Alpine Road Rockford, IL 61108	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	■ Other Specify Overdraft Fees	

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Case number (if know) Document Debtor 1 Brashanda S. Grayned

4.5	Mutual Management Services Co., LLC Nonpriority Creditor's Name 7177 Crimson Ridge Dr., Suite 10 PO Box 8740	Last 4 digits of account number  When was the debt incurred?	\$166.00
	Rockford, IL 61126-6235  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collecting for Creditor	
4.6	OSF Common Business Office	Last 4 digits of account number	\$222.00
	Nonpriority Creditor's Name PO Box 1806 Peoria, IL 61656-1806	When was the debt incurred? 05/2016	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Debt	
4.7	Rockford Memorial	Last 4 digits of account number	\$166.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 2400 N Rockton Ave	When was the debt incurred? 12/2012	
	Rockford, IL 61103  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Debt	

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Case number (if know)

4.8 \$505.00 Rockford Radiology Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 01/2016 2400 N Rockton Ave Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Debt** Other. Specify 4.9 Last 4 digits of account number \$449.00 Sprint Nonpriority Creditor's Name KSOPHT0101-Z4300 When was the debt incurred? 07/2012 6391 Sprint Parkway Overland Park, KS 66251 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes **Utilities** Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Convergent Healthcare Inc. Line **4.6** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. ■ Part 2: Creditors with Nonpriority Unsecured Claims 121 NE Jefferson St. Suite 100 Peoria, IL 61602 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Enhanced Recovery Company** Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims PO Box 57547 Jacksonville, FL 32241 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Mutual Management Svcs Co, LLC Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept Part 2: Creditors with Nonpriority Unsecured Claims PO Box 8740 Rockford, IL 61126 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

Official Form 106 E/F

Debtor 1 Brashanda S. Grayned

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Debtor 1 Brashanda S. Grayned

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**Rockford Mercantile Agency** Attn: BAnkruptcy Dept. PO Box 5847 Rockford, IL 61125

Line 4.8 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Т	otal Claim
	6f.	Student loans	6f.	\$	513.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	3,396.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	3,909.00

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		IAAAIII	111111111111111111111111111111111111			
Fill in this infor	Fill in this information to identify your case:					
Debtor 1	Brashanda S. Gra	ayned				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)				☐ Check if this is		
				amended filing		

# Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
	Oity		Olalo	Zii Oodo	

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		DUGUIIIE	:III Paue /4 t	<u> 11 4 /</u>	
Fill in this	s information to identify your				
Debtor 1	Brashanda S. Gra	ıyned			
Dahtaro	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	nber				
(if known)					Check if this is an amended filing
Officia	ll Form 106H				•
	dule H: Your Cod	ehtors			12/15
ocnec	die II. Tour God	CDIOIS			12/13
fill it out, a your name	e filing together, both are equand number the entries in the eand case number (if known)	boxes on the left. Attack . Answer every question	n the Additional Page t	o this page. On the top of a	
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No □ Ye					
	thin the last 8 years, have you na, California, Idaho, Louisiana,				tes and territories include
■ Na	Co to line 2				
	. Go to line 3. s. Did your spouse, former spou	use, or legal equivalent live	e with you at the time?		
	, , , ,		·		
in line Form	e 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed the cr	h you. List the person shown editor on Schedule D (Official edule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The creditor	r to whom you owe the debt at apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
•	Number Street City	State	ZIP Code	_	
	·				
3.2				☐ Schedule D, line	
	Name			□ Schedule E/F, line	
				☐ Schedule G, line _	
	Number Street City	State	ZIP Code		

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Fill	in this information to identify your ca	ase:									
Del	otor 1 Brashanda S	S. Grayned									
	otor 2 ouse, if filing)					_					
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLIN	IOIS							
(If kr	se number nown)		-				☐ An				
<u>O</u>	fficial Form 106I						M	M / DD/ Y	YYYY		
S	chedule I: Your Inc	ome									12/1
spo atta Par	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  t1: Describe Employment	r spouse is not filing wi	ith you, do	not include i	nfori	matic	on about	your spo	ouse. If more	e space is	needed,
1.	Fill in your employment information.		Debtor 1					Debtor 2	2 or non-filin	g spouse	
	If you have more than one job,	Employment status	■ Emplo	yed				☐ Emple	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed					☐ Not e	mployed		
	employers.	Occupation	CNA								
	Include part-time, seasonal, or self-employed work.	Employer's name	Alden D	ebes Nursi	ng F	lom	e				
	Occupation may include student or homemaker, if it applies.	Employer's address		ith Mulford d, IL 61108		ıd					
		How long employed the	here?	16 years				_			
Par	t 2: Give Details About Mor	nthly Income									
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have no	othing to repo	rt for	any I	line, write	\$0 in the	space. Inclu	de your noi	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the i	nformation fo	r all e	emplo	oyers for tl	nat perso	on on the line	s below. If	you need
							For Debi	tor 1	For Debto		
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$	3,	104.21	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.			3.	+\$		0.00	+\$	N/A	- 1

3,104.21

N/A

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Brashanda S. Grayned		C	ase number (if known)				
				1	For Debtor 1		Debtor -filing s	2 or	
	Cop	by line 4 here	4.	,	3,104.21	\$	9	N/A	-
_	Liet								_
5.		tall payroll deductions:			<b>*</b>	•			
	5a. 5b.	Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans	5a. 5b.		630.59 0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		0.00 0.00	\$ 		N/A N/A	_
	5d.	Required repayments of retirement fund loans	5d.		\$ 0.00 \$ 0.00	\$ 	-	N/A	_
	5e.	Insurance	5e.		0.00	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$ 0.00	\$		N/A	_
	5g.	Union dues	5g.	. ;	\$ <b>75.83</b>	\$		N/A	_
	5h.	Other deductions. Specify:	5h.	.+ \$	0.00	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	706.42	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,397.79	\$		N/A	_
8.	List 8a.	t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	. :	\$ 0.00	\$		N/A	
	8b.	Interest and dividends	8b.		\$ 0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	. ;	0.00	\$		N/A	_
	8d.	Unemployment compensation	8d.	. :	\$ 0.00	\$		N/A	_
	8e.	Social Security	8e.	. :	0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Assistance	8f.	;	\$ 57.00	\$		N/A	
	8g.	Pension or retirement income	8g.	. ;	0.00	\$		N/A	=
	8h.	Other monthly income. Specify:	_ 8h.	.+ \$	0.00	+ \$		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	57.00	\$		N/A	4
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2,454.79 + \$		N/A	= \$	2,454.79
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ	2,454.79		IN/A		2,454.79
11.	Star Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not accify:	depe		•		chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certain lies					12.	\$	2,454.79
13.	Do	you expect an increase or decrease within the year after you file this form No.	?						y income
	_	Van Fundain							

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	this information to identify	NOUE COOL				
	this information to identify					
Debtor	1 Brashanda	a S. Grayned		Ch	eck if this is: An amended filing	
Debtor	<u> </u>				A supplement show	wing postpetition chapter
(Spous	e, if filing)				13 expenses as of	the following date:
United	States Bankruptcy Court for the	he: NORTHERN DISTRIC	T OF ILLINOIS		MM / DD / YYYY	
Case n (If know						
Offi	cial Form 106J					
Sch	nedule J: Your	Expenses				12/15
Be as inforn	complete and accurate	as possible. If two marrie needed, attach another s	d people are filing tog neet to this form. On th	ether, both are ed ne top of any addi	qually responsible fo tional pages, write y	or supplying correct your name and case
Part 1		sehold				
_	s this a joint case?					
	No. Go to line 2.	e in a separate househol	12			
_	□ No	o in a separate nousener	••			
		nust file Official Form 106J-	2, Expenses for Separa	te Household of De	ebtor 2.	
2. <b>D</b>	o you have dependents	? 🗆 No				
	Oo not list Debtor 1 and Debtor 2.	■ Yes. Fill out this info each depende		nt's relationship to or Debtor 2	Dependent's age	Does dependent live with you?
С	Oo not state the					□ No
d	lependents names.		Daught	er	17	Yes
						□ No □ Yes
						□ No
						☐ Yes
						□ No
3. <b>D</b>	o your expenses includ	e <b>=</b>				☐ Yes
е	expenses of people other courself and your dependence	r than				
expen	ate your expenses as of	oing Monthly Expenses your bankruptcy filing da e bankruptcy is filed. If th				
the va		h non-cash government a and have included it on S			Your exp	enses
`	,					
	The rental or home owne payments and any rent for	rship expenses for your the ground or lot.	esidence. Include first	mortgage 4.	\$	377.00
If	f not included in line 4:					
4	a. Real estate taxes			4a.	\$	0.00
		er's, or renter's insurance		4b.	·	0.00
		repair, and upkeep expension or condominium due		4c.	·	25.00
		iation or condominium due ments for vour residence		4d. pans 5.	· ·	0.00

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Deptor 1 B	rashanda S. Grayned	Case num	ber (if known)	
6. Utilities	·			
	lectricity, heat, natural gas	6a.	\$	200.00
	/ater, sewer, garbage collection	6b.	·	0.00
	elephone, cell phone, Internet, satellite, and cable services	6c.		241.00
	other. Specify:	6d.	·	0.00
	nd housekeeping supplies	7.	\$	650.00
	re and children's education costs	8.	\$	0.00
	g, laundry, and dry cleaning	9.		
	al care products and services	9. 10.		200.00
	•		·	150.00
	l and dental expenses	11.	<b>&gt;</b>	50.00
	ortation. Include gas, maintenance, bus or train fare.	12.	\$	200.00
	nclude car payments. inment, clubs, recreation, newspapers, magazines, and books	13.	·	50.00
			·	
	ble contributions and religious donations	14.	Ψ	0.00
l5. <b>Insuran</b> Do not i	nclude insurance deducted from your pay or included in lines 4 or 20.			
	ife insurance deducted from your pay or included in lines 4 or 20.	15a.	\$	0.00
	lealth insurance	15a. 15b.		0.00
		15b. 15c.	·	
	ehicle insurance		· -	81.00
	hther insurance. Specify:	15d.	Φ	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.	10	<b>c</b>	0.00
Specify:		16.	<b>&gt;</b>	0.00
	nent or lease payments: Far payments for Vehicle 1	17a.	¢	0.00
	• •		·	
	ar payments for Vehicle 2	17b.	·	0.00
	other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	ayments of alimony, maintenance, and support that you did not report a		¢	0.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106I)	). 10.	\$	
9. Other p	ayments you make to support others who do not live with you.	19.	Ф	0.00
	eal property expenses not included in lines 4 or 5 of this form or on Sc		ur Incomo	
	lortgages on other property	20a.		0.00
	eal estate taxes	20b.		0.00
		20b. 20c.		
	roperty, homeowner's, or renter's insurance		· -	0.00
	laintenance, repair, and upkeep expenses	20d.	·	0.00
	lomeowner's association or condominium dues	20e.		0.00
1. Other: 3	Specify: Birthdays/Holidays/Haircuts	21.	+\$	150.00
22. Calcula	te your monthly expenses			
	d lines 4 through 21.		\$	2,374.00
	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	)	\$	
		-	l :	2 274 00
220. A00	d line 22a and 22b. The result is your monthly expenses.		\$	2,374.00
3. Calcula	te your monthly net income.			
	opy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,454.79
	copy your monthly expenses from line 22c above.	23b.	·	2,374.00
<b>•</b>	177		·	2,01 7100
23c. S	ubtract your monthly expenses from your monthly income.			
	he result is your <i>monthly net income</i> .	23c.	\$	80.79
	, ,		•	
	expect an increase or decrease in your expenses within the year after			
	pple, do you expect to finish paying for your car loan within the year or do you expect yo	our mortgage	payment to increa	ase or decrease because of
_	ion to the terms of your mortgage?			
■ No.				
П Уес	Explain here:			·

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Fill in this inform	mation to identify your	case:			
Debtor 1	Brashanda S. Gra	avned			
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle News	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Forn	o 106Doc				
			Dalatada	0 - 1 1 - 1	
Declarat	ion About a	an Individual	Deptor's	Schedules	12/15
obtaining money years, or both. 18		n connection with a bank			tement, concealing property, or 000, or imprisonment for up to 20
Did you pa	y or agree to pay some	one who is NOT an attorn	ney to help you fill	out bankruptcy forms?	
■ No					
☐ Yes. N	lame of person			Attach Bai	nkruptcy Petition Preparer's Notice,
				Declaration	n, and Signature (Official Form 119)
	Ity of perjury, I declare e true and correct.	that I have read the sumr	nary and schedule	s filed with this declarat	ion and
X /s/ Bras	shanda S. Grayned		X		
Brasha	anda S. Grayned re of Debtor 1		Signatu	ure of Debtor 2	

Date \_\_\_\_\_

Date April 5, 2017

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Fill ir	n this inform	ation to identify you	r case:			
Debte		Brashanda S. G				
		First Name	Middle Name	Last Name		
Debte (Spous	or 2 e if, filing)	First Name	Middle Name	Last Name		
Unite	d States Ban	kruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS		
		aptoy Countries and				
(if know	number					Check if this is an mended filing
Offi	cial For	m 107				
			Affairs for Indivi	duals Filing for B	ankruptcy	4/10
inforn	nation. If mo	ore space is needed, ). Answer every que	attach a separate sheet to	this form. On the top of any	equally responsible for sup y additional pages, write you	
		current marital statu				
[	☐ Married ■ Not marr	ied				
2. [	Ouring the la	st 3 years, have you	lived anywhere other than	where you live now?		
I [	■ No □ Yes. List	all of the places you I	ived in the last 3 years. Do no	ot include where you live now	1.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
I	■ No □ Yes. Mak	ce sure vou fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H)		
	1 C3. War	te sare you iii out oor	icadic 11. Tour Godebiors (G	moarronn roory.		
Part	2 Explain	the Sources of You	r Income			
F	fill in the total	amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?
	□ No					
ı	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$10,028.96	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known) Debtor 1 Brashanda S. Grayned

				Dahtan 4		Dahtan 0		
				Debtor 1 Sources of income	Gross income	Debtor 2 Sources of inc	ome	Gross income
				Check all that apply.	(before deductions and exclusions)	Check all that a		(before deductions and exclusions)
	r last calen nuary 1 to		31, 2016 )	■ Wages, commissions, bonuses, tips	\$31,310.44	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
	r the calend nuary 1 to			■ Wages, commissions, bonuses, tips	\$31,408.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
5.	Include include and other winnings.	come regard public bene If you are fil	dless of wheth fit payments; ing a joint cas the gross inco	per that income is taxable. Expensions; rental income; integer and you have income that	o previous calendar years? amples of other income are a rest; dividends; money collect you received together, list it o tely. Do not include income the	ted from lawsuits; nly once under De	royalties; ar ebtor 1.	
				Dahtan 4		Dobton 0		
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
	om January date you f		nt year until nkruptcy:	SNAP/LINK/Food Stamps	\$495.00			
	r last calen nuary 1 to		31, 2016 )	SNAP/LINK/Food Stamps	\$1,980.00			
Pai	rt 3: List	Certain Pa	vments You	Made Before You Filed for	Bankruptcy			
6.		Debtor 1's	or Debtor 2 ebtor 1 nor D	s debts primarily consume	r debts? umer debts. Consumer debts	s are defined in 11	U.S.C. § 10	01(8) as "incurred by an
		0	,	, ,,	id you pay any creditor a total	I of \$6,425* or mo	re?	
		□ <sub>No.</sub> □ <sub>Yes</sub>	Go to line 7		id a total of CC 105* or mara i		manta and i	the total amount vou
			paid that cre not include	editor. Do not include paymer payments to an attorney for t	id a total of \$6,425* or more in the for domestic support oblights bankruptcy case. Its after that for cases filed on	ations, such as ch	nild support a	and alimony. Also, do
	■ Yes.	Debtor 1	or Debtor 2 o	r both have primarily consu				•
		_	·		, ,	,		
		■ No.	Go to line 7		: d = 4-4-1 af #0000 = = =====	labo antol corre		st annellitan De rest
		□ Yes	include pay		id a total of \$600 or more and bligations, such as child supp			
	Creditor'	s Name an	d Address	Dates of payme	ent Total amount	Amount you	Was this	payment for

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Case number (if known) Document Debtor 1 Brashanda S. Grayned

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.  No									
	☐ Yes. List all payments to an insider.									
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment				
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a d	ebt that benefited an				
	Yes. List all payments to an insider									
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment ditor's name				
Par	t 4: Identify Legal Actions, Repossession	ns and Foreclosures								
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.									
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case				
	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.		rty repossessed, f	oreclosed, garni	shed, attache	d, seized, or levied?				
	Creditor Name and Address	Describe the Property		Date		Value of the				
		Explain what happened	1		property					
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed  No Yes. Fill in the details.	ptcy, did any creditor, incl		nancial institution	n, set off any a	amounts from your				
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount				
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  No Yes		rty in the possess	ion of an assigne	e for the ben	efit of creditors, a				
Par	t 5: List Certain Gifts and Contributions									
	Within 2 years before you filed for bankrup	otcy, did you give any gifts	s with a total value	of more than \$60	00 per person	?				
	<ul> <li>✓ Yes. Fill in the details for each gift.</li> <li>Gifts with a total value of more than \$600 per person</li> <li>Person to Whom You Gave the Gift and</li> </ul>	Describe the gifts		Date the g	s you gave jifts	Value				
	Address:									

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14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or			s with a tota	I value of more than	\$600 to any charity?			
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	total	Describe what you contributed		Dates you contributed	Value			
Par	rt 6: List Certain Losses								
15.	Within 1 year before you filed for banks or gambling?	ruptcy o	r since you filed for bankruptcy, did yo	ou lose anyt	hing because of thef	t, fire, other disaster			
	<ul><li>■ No</li><li>☐ Yes. Fill in the details.</li></ul>								
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the load the amount that insurance has paid. Linus calciums on line 33 of Schedule A/B: F	st pending	Date of your loss	Value of property lost			
Par	rt 7: List Certain Payments or Transfe	re							
	consulted about seeking bankruptcy of Include any attorneys, bankruptcy petition  No Yes. Fill in the details.  Person Who Was Paid Address			·	Date payment or transfer was	Amount of payment			
	Email or website address Person Who Made the Payment, if Not			made	<b>F-1</b> /				
	001DebtorCC 378 Summit Ave. Jersey City, NJ 07306 www.debtorcc.org	\$14.95	3/30/2017 \$14.						
	Springer Law Firm 2222 E State St, Suite 107 Rockford, IL 61104		\$500.00		3/2017	\$500.00			
17.	Within 1 year before you filed for banks promised to help you deal with your cr. Do not include any payment or transfer th  No	editors o	or to make payments to your creditors		r transfer any prope	rty to anyone who			
	Yes. Fill in the details.								
	Person Who Was Paid Address		Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment			
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.								
	Yes. Fill in the details.			_					
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made			
	Person's relationship to you								

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Debtor 1 Brashanda S. Grayned

19.	benef	n 10 years before you filed for bankru iciary? (These are often called asset-pr lo		ny property to a	a self-settl	ed trust or similar device	of which	h you are a
		es. Fill in the details.	Description and	value of the pro	nerty tran	eferred	Date 1	Fransfer was
	Hain		Description and	value of the pre	perty train	isierieu	made	Transici was
Pa	rt 8:	List of Certain Financial Accounts, In	nstruments, Safe Depos	it Boxes, and S	torage Un	its		
20.	sold, Includ	n 1 year before you filed for bankrupto moved, or transferred? le checking, savings, money market, es, pension funds, cooperatives, asso	or other financial accou	unts; certificate:	s of depos	•	•	
	_	lo						
		es. Fill in the details.				_		
		e of Financial Institution and ess (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred		Last balance re closing or transfer
21.	•	u now have, or did you have within 1 or other valuables?	year before you filed fo	or bankruptcy, a	ny safe de	eposit box or other depo	sitory for	securities,
		lo 'es. Fill in the details.						
	_	es. Fin in the details.	Who else had ac	to it?	Dogoribe	e the contents	Do	ve etill
		ess (Number, Street, City, State and ZIP Code)	Address (Number, State and ZIP Code)		Describe	e the contents		you still e it?
22.	Have	you stored property in a storage unit	or place other than you	ır home within 1	l year befo	ore you filed for bankrup	tcy?	
		ło						
	_	es. Fill in the details.						
	Name	e of Storage Facility	Who else has or	had access	Describe	e the contents	Do	you still
		ess (Number, Street, City, State and ZIP Code)	to it?	to it? Address (Number, Street, City,				e it?
Pa	rt 9:	Identify Property You Hold or Contro	I for Someone Else					
23.		u hold or control any property that so meone.	omeone else owns? Inc	lude any prope	rty you bo	rrowed from, are storing	for, or he	old in trust
		lo 'es. Fill in the details.						
		er's Name ess (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	e the property		Value
Pa	rt 10:	Give Details About Environmental Inf	formation					
For	the pu	rpose of Part 10, the following definit	ions apply:					
		onmental law means any federal, state						
	toxic	substances, wastes, or material into tations controlling the cleanup of thes	the air, land, soil, surfac	ce water, groun				
		neans any location, facility, or propert n, operate, or utilize it, including disp	-	environmental	law, whet	her you now own, opera	te, or utili	ize it or used

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

hazardous material, pollutant, contaminant, or similar term.

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Debtor 1 Brashanda S. Grayned

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?											
	No											
	Yes. Fill in the details.											
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice								
25.	. Have you notified any governmental unit of any release of hazardous material?											
	■ No □ Yes. Fill in the details.											
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice								
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.											
	■ No □ Yes. Fill in the details.	es. Fill in the details.										
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case								
Par	11: Give Details About Your Business or Conr	nections to Any Business										
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?											
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time											
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)											
	□ A partner in a partnership											
	☐ An officer, director, or managing executive of a corporation											
	☐ An owner of at least 5% of the voting or	equity securities of a corporation										
	■ No. None of the above applies. Go to Part 1	12.										
	☐ Yes. Check all that apply above and fill in th	ne details below for each business	i.									
		scribe the nature of the business	Employer Identification number									
	Address (Number, Street, City, State and ZIP Code)	ne of accountant or bookkeeper	Do not include Social Security n  Dates business existed	umber or ITIN.								
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.											
	■ No □ Yes. Fill in the details below.											
	Name Address (Number, Street, City, State and ZIP Code)	e Issued										

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Debtor 1 Brashanda S. Grayned Case number (if known)

Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Brashanda S. Grayned Signature of Debtor 2 Brashanda S. Grayned Signature of Debtor 1 Date April 5, 2017 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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				_
Fill in this info	rmation to identify your	case:		
Debtor 1	Brashanda S. Gra	ayned		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Officed States B	ankiupicy Court for the.	NORTHERNOIS	TRICT OF ILLINOIS	
Case number				
(ii kilowii)				Check if this is an amended filing
If you are an inc creditors have you have lea You must file th which on the If two married p sign a Be as complete write y	dividual filing under charve claims secured by you sed personal property a sis form with the court wever is earlier, unless the form seeple are filing togethe and date the form.	pter 7, you must fil our property, or and the lease has n vithin 30 days after ne court extends th r in a joint case, bo ole. If more space is mber (if known).		eet for the meeting of creditors, ne creditors and lessors you list information. Both debtors must
1. For any credi			: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
information be Identify the c	pelow. reditor and the property t	hat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	
Description	f		Retain the property and enter into a	☐ Yes
Description o property	ı		Reaffirmation Agreement.  Retain the property and [explain]:	
securing debi	t:		Retain the property and [explain].	<u> </u>
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
Description	4		☐ Retain the property and enter into a	☐ Yes
Description o	II		Reaffirmation Agreement.	
property securing deb	<b>+</b> ·		☐ Retain the property and [explain]:	
securing debi				

Official Form 108

Creditor's

Creditor's

Description of

securing debt:

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

☐ Surrender the property.

☐ Surrender the property.

☐ Retain the property and redeem it.

 $\hfill\square$  Retain the property and enter into a

☐ Retain the property and [explain]:

Reaffirmation Agreement.

□ No

☐ Yes

☐ No

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Debtor 1	Brashanda S. Grayned	Case number (if known)	
name: Descrip		☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
	g debt:	☐ Retain the property and [explain]:	-
For any u	rmation below. Do not list real estate leases	ses sted in Schedule G: Executory Contracts and Unexpired s. Unexpired leases are leases that are still in effect; the se if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property leases		Will the lease be assumed?
Lessor's r Description Property:	name: on of leased		□ No
Froperty.			☐ Yes
Lessor's name: Description of leased Property:			□ No □ Yes
			□ res
Lessor's r Description Property:	name: on of leased		□ No
r roporty.			☐ Yes
Lessor's r			□ No
Description of leased Property:			☐ Yes
Lessor's r			□ No
Description Property:	on of leased		☐ Yes
Lessor's r			□ No
Description Property:	on of leased		☐ Yes
Lessor's r	name: on of leased		□ No
Property:			☐ Yes
Part 3:	Sign Below		
Under per	nalty of perjury, I declare that I have indicate hat is subject to an unexpired lease.	ed my intention about any property of my estate that sec	ures a debt and any personal
X /s/ E	Brashanda S. Grayned	X	
Bra	shanda S. Grayned ature of Debtor 1	Signature of Debtor 2	
Date	April 5, 2017	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-80797 Doc 1 Filed 04/05/17 Entered 04/05/17 14:49:17 Desc Main Document Page 43 of 47

B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Brashanda S. Grayned		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPI	ENSATION OF ATTO	RNEY FOR D	EBTOR(S)
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the file rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy	, or agreed to be paid	d to me, for services rendered or to
	For legal services, I have agreed to accept		\$	500.00
	Prior to the filing of this statement I have received			500.00
	Balance Due		\$	0.00
2. 7	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. 7	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed com	npensation with any other person	n unless they are mer	nbers and associates of my law firm.
1	☐ I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n			
5. ]	In return for the above-disclosed fee, I have agreed to	render legal service for all aspec	cts of the bankruptcy	case, including:
t c	a. Analysis of the debtor's financial situation, and renot. Preparation and filing of any petition, schedules, st. Representation of the debtor at the meeting of cred. [Other provisions as needed]  Negotiations with secured creditors to reaffirmation agreements and applicat 522(f)(2)(A) for avoidance of liens on h	atement of affairs and plan whice itors and confirmation hearing, a reduce to market value; ex- ions as needed; preparation	th may be required; and any adjourned he	arings thereof;
б. І	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any dany other adversary proceeding.			ces, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of a ankruptcy proceeding.	any agreement or arrangement for	or payment to me for	representation of the debtor(s) in
Α	pril 5, 2017	/s/ Daniel A. Spr	inger	
	ate	Daniel A. Spring Signature of Attorn Springer Law Fi 2222 E State St Suite 107 Rockford, IL 611	er ley rm	
		815.312.4725 dspringerlaw@g	ımail com	
		Name of law firm	,aoom	

Springer Law Firm

2222 East State St. # 107, Rockford, IL

815.312.4275

### CHAPTER 7 RETAINER AGREEMENT

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- 1. The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide information as requested by our attorney, your case may be closed.
- Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold. Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.

10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Attorney Print: Michael Blessen back

## **United States Bankruptcy Court** Northern District of Illinois

In re	Brashanda S. Grayned		Case No.		
		Debtor(s)	Chapter	7	
	VEI	RIFICATION OF CREDITOR MAT	TRIX		
	Number of Creditors: 13				
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.				
Date:	April 5, 2017	/s/ Brashanda S. Grayned Brashanda S. Grayned Signature of Debtor			

Advance America Attn: Bankruptcy Dept. 1239 Sandy Hollow Rd Rockford, IL 61109

Commenity Bank/VCTRSSEC PO Box 182789 Columbus, OH 43218

Convergent Healthcare Inc. Attn: Bankruptcy Dept. 121 NE Jefferson St. Suite 100 Peoria, IL 61602

Dept of Ed/Nelnet 3015 Parker Rd. Suite 400 Aurora, CO 80014

Enhanced Recovery Company Attn: Bankruptcy Dept. PO Box 57547 Jacksonville, FL 32241

Members Alliance Credit Union 2550 South Alpine Road Rockford, IL 61108

Mutual Management Services Co., LLC 7177 Crimson Ridge Dr., Suite 10 PO Box 8740 Rockford, IL 61126-6235

Mutual Management Svcs Co, LLC Attn: Bankruptcy Dept PO Box 8740 Rockford, IL 61126

OSF Common Business Office PO Box 1806 Peoria, IL 61656-1806

Rockford Memorial Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103 Rockford Mercantile Agency Attn: BAnkruptcy Dept. PO Box 5847 Rockford, IL 61125

Rockford Radiology Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103

Sprint KSOPHT0101-Z4300 6391 Sprint Parkway Overland Park, KS 66251